संघ राज्यक्षेत्रों में कार्यान्वित तंत्र को तेज करना, और (12) राष्ट्रीय, राज्य और जिला स्तर पर उच्च स्तरीय अन्तरक्षेत्रीय समन्वय तंत्र तैयार करना आदि ।

**Cobalt Units in AP.**

981. DR. YELAMANCHILI SIVAJI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is any proposal from Government of Andhra Pradesh for sanc tion of cobalt units; and

(b) if so, what are the details thereof; and what action Govenment have taken thereon?

THE MINISTER CH* STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) and (b) There is no proposal from Govt, of Andhra Pradesh for financial assistance for Cobalt Units under consideration of this Ministry.

**Health care to the Capital**

982. SHRI PRABHAKAR B. KORE:
SHRI B. K. HARIPRASAD:

Will the Minister of HEALTH AND FAMILY WELFARE be please to state:

(a) whether Government's attention has been drawn to a report in the Sunday Mail of 24-30 November, 1991 on the dis mal picture of health-care in the Capital;

(b) if so, what are the Government's reaction thereon; and

(c) whether Government propose to involve the NGOs in the task and if so, what are the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) Yes Sir.

(b) As per report of Delhi Administration since 1989 regular schemes to provide medical care to residents of JJ clusters at their door-steps are in operation. Mobile Clinics are deployed which provide comprehensive medical care and health education throughout the year to big JJ clusters. The number of these mobile clinics is suitabley increased during summer and rainy season when the incidence of gastroenteritis and cholera normally rises. As a result there is a marked decline in both cases and deaths due to gastroenteritis and cholera. In this health delivery system Urban Basic Services (UBC) Volunteers also play a fery important role by contacting the various agencies for taking remedial measures if services in a particular area are deficient.

(c) Medical and Public Health Department of Delhi Administration has not only involved the NGOs but also the local residents/beneficiaries in .the delivery of various health Schemes and Services.

**Development of substitute of Blood**

983. MISS SAROJ KHAPARDE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

*(A)* whether it is a fact that snedical scientists in Bombay have developed a substitute blood that can be administered to patients of any blood group in an emergency; and

(b) if so, what are the details in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) The Indian Council of Medical Research has informed that a blood substitute called Storma Free haemoglobin (SFH) solution is being developed at the Institute of Immunohasmato-logy (ICMR), Bombay. This substitute can be used during emergency situation when either a group compatible blood or matching facilities is not available. In other words, this can be given without blood group matching.

(b) the project work is planned to be undertaken in three phases, as shown below. Currently, phase I is in operation.